



59100 DIV (30471)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

☒ In re patent application of: James M. Fenton et al.  
☒ Serial No.: 10/684,982  
☒ Filed; October 14, 2003

Title: MEMBRANE ELECTRODE ASSEMBLIES USING IONIC  
COMPOSITE MEMBRANES

Confirmation No.: 4721

**ASSERTION OF SMALL ENTITY STATUS PURSUANT TO 37 C.F.R. § 1.27(c)(1), 37  
C.F.R. § 1.27(a)(3) (NONPROFIT ORGANIZATION) AND REFUND REQUEST  
PURSUANT TO 37 C.F.R. § 1.26 and 37 C.F.R. § 1.28(a)**

I hereby state that I am

- ☐ the owner of the nonprofit organization identified below:  
☐ an official of the nonprofit organization empowered to act on behalf of the concern  
identified below:  
☒ registered attorney or agent identified below:

Name of Nonprofit Organization University of Connecticut  
Address of Nonprofit Organization 263 Farmington Road, Farmington, CT 06030-6207

I hereby state that the above identified nonprofit organization qualifies as a small entity, as defined  
in 37 CFR 1.27(a)(3), for purposes of paying reduced fees to the United States Patent and  
Trademark Office.

I hereby state that rights under contract or law have been conveyed to, and remain with, the  
nonprofit organization identified above, with regard to the invention described in

- ☐ the specification filed herewith, with title as listed above.  
☒ the application identified above.  
☐ the patent identified above.

I acknowledge the duty to file, in this application or patent, notification of any change in  
status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying,  
the earliest of the issue fee or any maintenance fee due after the date on which status as a small  
business entity is no longer appropriate. (37 CFR 1.28(b)).

Adjustment date: 11/03/2005 SDENDD01  
07/07/2005 NLAWRENC 00000002 041105 10684982  
01 FC 1252 450.00 CR



### REFUND REQUEST

Pursuant to 37 C.F.R. §§ 1.26 and 1.28, Applicant hereby requests a refund for overpayment of fees made within the last ninety days. A schedule of the fees paid and total overpayment are described in detail below:

Erroneous Payment	Amount Paid	Date Paid	Correct Amount	Overpayment
Two Month Extension of Time Fee Pursuant to 37 C.F.R. § 1.136(a)	\$ 450.00	06/27/2005	\$ 225.00	\$ 225.00
Total Overpayment				\$ 225.00

The Director is hereby authorized to refund the above-described overpayment of fees in the amount of \$225 to our Deposit Account No. 04-1105, under Order No. 59100 DIV (30471).

### CONCLUSION

No fee is believed to be due for this submission. The Director is hereby authorized to charge any deficiency in the fees filed, asserted to be filed or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Deposit Account No. 04-1105, under Order No. 59100(30471).

Respectfully submitted,

Date: September 1, 2005

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DeRef

PTO/SB/21 (09-04)  
Approved for use through 07/31/2006. OMB 0651-0031  
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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	10/684,982-Conf. #4721
	Filing Date	October 14, 2003
	First Named Inventor	James M. Fenton
	Art Unit	N/A
	Examiner Name	Not Yet Assigned
Total Number of Pages in This Submission	Attorney Docket Number	59100DIV(30471)

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Assertion of Small Entity Status Return Receipt Postcard
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	EDWARDS & ANGELL LLP		
Signature			
Printed name	Brian R. Pollack		
Date	September 1, 2005	Reg. No.	47,001

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.	
Dated: September 1, 2005	Signature: <u>Denise Kacinski</u> (Denise Kacinski)